

## APPENDIX G

OM 55-1-1  
31 Jan 90

<b>REQUEST FOR APPROVAL OF FOREIGN TRAVEL</b> <small>(ER 55-1-2)</small> <b>(SEE INSTRUCTIONS ON REVERSE)</b>			DATE
THRU	TO	FROM	
1. NAME OF TRAVELER(S)			
2. PURPOSE			
3. JUSTIFICATION FOR TRAVEL			
<b>FOR ILLUSTRATION PURPOSES ONLY</b> <i>(Local reproduction authorized - blank masters available from local FMO)</i>			
4. PROPOSED ITINERARY			
5. a. FUND SOURCE: <input type="checkbox"/> CORPS MILITARY <input type="checkbox"/> CORPS CIVIL b. REIMBURSABLE FROM: <input type="checkbox"/> CORPS MILITARY <input type="checkbox"/> CORPS CIVIL <input type="checkbox"/> OTHER _____			
6. ESTIMATED COST	7. FORWARD TO	8. INVITATIONAL TRAVEL ORDER <input type="checkbox"/> YES <input type="checkbox"/> NO	
9. RECENT FOREIGN TRAVEL			
10. OTHER CORPS PARTICIPANTS			
11. IS THE MISSION EXCLUSIVELY IN DIRECT SUPPORT OF U. S. FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO			
12. THE UNDERSIGNED HAS REVIEWED THE NEED FOR THIS TRAVEL AND HAS DETERMINED THAT THIS REQUEST <input type="checkbox"/> SHOULD, <input type="checkbox"/> SHOULD NOT BE FORWARDED TO THE OASA (CW) FOR APPROVAL IF THE RESPONSE TO ITEM #11 IS "NO" AND "SHOULD NOT" IS INDICATED IN ABOVE SENTENCE. EXPLAIN RATIONALE.			
13. DO FORM(S) 1610 PROVIDED AS ENCLOSURE		14. OFFICIAL PROGRAM PROVIDED AS ENCLOSURE	
COMMANDER/DIRECTOR (Type name, rank and title)		SIGNATURE	DATE

ENG FORM 4960-R, Sep 87

Procurement (CELD-17)

## INSTRUCTIONS

1. ENTER NAME OF TRAVELER(S).
2. GIVE DETAILED/SPECIFIC PURPOSE. DO NOT USE AMBIGUOUS TERMS, SUCH AS SITE VISIT.
3. INDICATE WHY TRAVEL IS NECESSARY AND WHAT THE IMPACT ON MISSION ACCOMPLISHMENT WOULD BE IF DISAPPROVED. MUST PROVIDE JUSTIFICATION FOR EACH LOCATION LISTED ON THE DD FORM(S) 1610 AND ITEM #4 BELOW.
4. PROVIDE DATE AND TIME OF ALL ARRIVALS AND DEPARTURES, EXCEPT TRANSIT POINTS, INCLUDE ANY CONTEMPLATED LAYOVERS OR ANNUAL LEAVE TO BE TAKEN IN CONJUNCTION WITH OFFICIAL TRAVEL.
5. a. INDICATE WHETHER THE FUND SOURCE ON THE DD FORM(S) 1610 IS CORPS MILITARY OR CORPS CIVIL. IF ULTIMATE FUND SOURCE IS THE SAME AS INDICATED ON THE DD FORM(S) 1610, THIS COMPLETES ITEM #5. IF NOT, GO ON TO ITEM #5b.  
  
b. IF ULTIMATE FUND SOURCE IS OTHER THAN THAT SHOWN IN ITEM #5a, INDICATE REIMBURSABLE FROM CORPS MILITARY, CORPS CIVIL OR OTHER (identify other: e.g., U.S. Army, U.S. Air Force, Voice of America, the Korean Government, etc.).
6. PROVIDE THE TOTAL ESTIMATED COST AS INDICATED IN ITEM #14 OF DD FORM(S) 1610.
7. INDICATE ELEMENT(S) WITHIN HQUSACE/OCE WHERE REQUEST SHOULD BE FORWARDED FOR REVIEW (e.g., CECW (Directorate of Civil Works), CEEC (Directorate of Engineering and Construction), CERD (Directorate of Research and Development), etc.).
8. IF YES, INDICATE MAILING ADDRESS OF TRAVELER IN ITEM #1. PROVIDE ANY SPECIAL INSTRUCTIONS AND FUND CITE AS AN ENCLOSURE ON BOND PAPER.
9. TRAVELER MUST PROVIDE A LIST OF HIS/HER FOREIGN TRAVEL WHICH HAS OCCURRED DURING THE CURRENT FISCAL YEAR AS WELL AS THAT WHICH HAS OCCURRED IN THE PAST FISCAL YEAR. INCLUDE DATES, LOCATION OR DESTINATION, PURPOSE, AND IF THE ULTIMATE FUNDING WAS CIVIL OR MILITARY. IF INVITATIONAL TRAVEL ORDER INDICATE "NOT APPLICABLE".
10. LIST NAME AND ORGANIZATION OF PARTICIPANTS, IF KNOWN. IF UNKNOWN INDICATE "UNKNOWN".
11. THIS ITEM MUST BE COMPLETED.
12. THIS ITEM MUST BE COMPLETED.
13. ENCLOSE ALL COPIES OF DD FORM(S) 1610 FOR EACH TRAVELER INDICATED IN ITEM #1. INDICATE ENCLOSURE NUMBER IN SPACE PROVIDED ON FORM (ITEM 13).
14. ENCLOSE A COPY OF THE OFFICIAL PROGRAM OF CONFERENCE, MEETING, SEMINAR, ETC. INDICATE ENCLOSURE NUMBER IN SPACE PROVIDED ON FORM (ITEM 14). INDICATE IF NOT AVAILABLE OR NOT APPLICABLE.

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